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contained in this form are not

ATTENTION

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption state exemption unless such exemption is predicated on the filing of a federal notice.

UNITED STATES SECURITIES AND EXCHANGE COMMISSIONAY 1 1 2004 Washington, D.C. 20549

FORM D

NOTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D. SECTION 4(6), AND/OR UNIFORM LIMITED OFFERING EXEMPTION

OMB APPROVAL OMB Number: 3235-0076 Expires: May 31, 2005 Estimated average burden hours per response... l

SEC USE ONLY			
Prefix		Serial	
DATE RECEIVED			

821483

Name of Offering ([] check if this is an amendment and name has changed, and indicate change.)

Delta Petroleum Corporation

[] Rule 504 [] Rule 505 [K] Rule 506 [X] Section 4(6) [] ULOE

Type of Filing: $[_{ m X}]$ New Filing $\;\;[$] Amendment
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Filing Under (Check box(es) that

apply):

A. BASIC IDENTIFICATION DATA

Enter the information requested about the issuer

Name of Issuer ([] check if this is an amendment and name has changed, and indiciate change.)

Delta Petroleum Corporation

(Number and Street, City, State, Zip Code) Address of Executive Offices

Telephone Number (Including Area Code)

475 Seventeenth Street - Suite 1400, Danver, CO 80202 (303) 293-9133

Address of Principal Business Operations - (Number and Street, City, State, Zip Code) — Telephone Number (Including Area

Code) (if different from Executive Offices)

same as above

Brief Description of Business

exploration and development of oil and gas properties

Type of Business Organization	
[X] corporation] limited partnership, already formed [] other (please specify):
[] business trust [] limited partnership, to be formed
	Month Year
Actual or Estimated Date of Incorp	oration or Organization: $[1]_2$] $[8]$ 4 $]$ \hat{x}] Actual $[]$ Estimated
Jurisdiction of Incorporation or Org	anization: (Enter two-letter U.S. Postal Service abbreviation for State: ON for Canada; FN for other foreign jurisdiction) [[] [0]

GENERAL INSTRUCTIONS

Federal:

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6).

When to File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address give below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where to File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies of manually signed must be photocopies of manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

State:

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix in the notice constitutes a part of this notice and must be completed.

A. BASIC IDENTIFICATION DATA

. Enter the information requested for the following:

- Each promoter of the issuer. If the issuer has been organized within the past five years;
- Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer;
- Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and
- Each general and managing partner of partnership issuers.

Check Box(es) that Apply:	[] Promoter [] Beneficial Owner	K] Executive Officer	[X] Director [] General and/or Managing Partner	
-uli Name (Last name	first, if individual)			
Larson, Jr., Al	eron H.			
	e Address (Number and Street, Street - Suite 1400, D		•	
Check Box(es) that Apply:	[] Promoter [] Beneficial Owner	队] Executive Officer	[X] Director [] General and/or Managing Partner	
Full Name (Last name Parker, Roger A	•			
	e Address (Number and Street, n Street – Suite 1400, D		,	
Check Box(es) that Apply:	[] Promoter [] Beneficial Owner	[X] Executive Officer	[] Director [] General and/or Managing Partner	
Full Name (Last name	·			
Nanke, Kevin K.	e Address (Number and Street,	City State 7in Coo	۱۵)	
	n Street - Suite 1400, D		,	
Check Box(es) that Apply:		[] Executive Officer	[X] Director [] General and/or Managing Partner	
Full Name (Last name Eckelberger, Je				
	ce Address (Number and Street I Road – Suite 450, Engl	,	•	
		,		

Check Box(es) that Apply:	[] Promoter [] Beneficial Owner	[] Executive Officer		General and/or Managing Partner	
Full Name (Last name Wallace, James	·				
	e Address (Number and Street, Street - Suite 1300, Da	•	•		
Check Box(es) that Apply:	[] Promoter [] Beneficial Owner	[] Executive Officer	X] Director []	General and/or Managing Partner	
Full Name (Last name	e first, if individual)				
Castle II, Jose	ph L.				
Business or Residence	e Address (Number and Street,	, City, State, Zip Cod	ie)		
One Radnor Corp	orate Center - Suite 25	0, Radnor, Penn	sylvania 1908	37	
Check Box(es) that Apply:	[] Promoter [] Beneficial Owner	[] Executive Officer	[X] Director [General and/or Managing Partner	·
Full Name (Last name	e first, if individual)				
Lewis, Russell	S.				
	ce Address (Number and Street Circle, Dulles, Virgini	,	ie)		
Check Box(es) that Apply:	[] Promoter [] Beneficial Owner	[] Executive Officer	[젔 Director [] General and/or Managing Partner	
Full Name (Last nam Keller, John P.					
	ce Address (Number and Street Plaza - Suite 510, Nort		·		
Check Box(es) that Apply:	[] Promoter [X] Beneficial Owner	[] Executive Officer	[] Director [] General and/or Managing Partner	
Full Name (Last nam	e first, if individual)	***************************************			
Castle Energy (Corporation				
Business or Residen	ce Address (Number and Stree	t, City, State, Zip Co	de)		
One Radnor Corp	porate Center - Suite 25	50, Radnor, Peni	nsylvania 190	187	
	(Use blank sheet, or copy ar	id use additional co	opies of this she	et, as necessary.)	

Check Box(es) that Apply:	[] Promoter [] Beneficial Owner	[X] Executive Officer	[] Director []	General and/or Managing	
				.Partner	
Full Name (Last name	first, if individual)				
Wallace, John					
Business or Residence	e Address (Number and Street,	City, State, Zip Cod	e)		
475 Seventeenth	Street - Suite 1400, D	enver, Colorado	80202 ,		2 · · · · · · · · · · · · · · · · · · ·
Check Box(es) that Apply:	[] Promoter [] Beneficial Owner	[] Executive Officer	[] Director []	General and/or Managing Partner	
Full Name (Last name	first, if individual)				
Business or Residenc	e Address (Number and Street	, City, State, Zip Cod	e)		
Check Box(es) that Apply:	[] Promoter [] Beneficial Owner	[] Executive Officer	[] Director [General and/or Managing	· · · · · · · · · · · · · · · · · · ·
		,		Partner	·
Full Name (Last name	first, if individual)				
Business or Residence	e Address (Number and Street	, City, State, Zip Cod	ie)		
Check Box(es) that Apply:	[] Promoter [] Beneficial Owner	[] Executive Officer	[] Director [] General and/or Managing Partner	
Full Name (Last name	e first, if individual)				
Business or Residence	e Address (Number and Street	, City, State, Zip Coo	de)		
Check Box(es) that Apply:	[] Promoter [] Beneficial Owner	[] Executive Officer	[] Director [] General and/or Managing Partner	
Full Name (Last name	e first, if individual)				į
Business or Residence	ce Address (Number and Street	t, City, State, Zip Coo	de)		

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

B. INFORMATION ABOUT OFFERING				
1. Has the issuer sold, or does the issuer intend to sell, to non-accredited investors in offering?	this Yes No [] [XX]			
Answer also in Appendix, Column 2, if filing under ULOE.				
2. What is the minimum investment that will be accepted from any individual?				
3. Does the offering permit joint ownership of a single unit?	Yes No [] [XX]			
4. Enter the information requested for each person who has been or will be paid or given, directly or indirectly, any commission or similar remuneration for solicitation of purchasers in connection with sales of securities in the offering. If a person to be listed is an associated person or agent of a broker or dealer registered with the SEC and/or with a state or states, list the name of the broker or dealer. If more than five (5) persons to be listed are associated persons of such a broker or dealer, you may set forth the information for that broker or dealer only.				
Full Name (Last name first, if individual)				
None				
Business or Residence Address (Number and Street, City, State, Zip Code)				
Name of Associated Broker or Dealer	•			
States in Which Person Listed Has Solicited or Intends to Solicit Purchasers (Check "All States" or check individual States)	[] All States			
[AL] [AK] [AZ] [AR] [CA] [CO] [CT] [DE] [DC] [FL] [GA	[HI] [ID]			
[IL] [IN] [IA] [KS] [KY] [LA] [ME] [MD] [MA] [MI] [MI				
[MT] [NE] [NV] [NH] [NJ] [NM] [NY] [NC] [ND] [OH] [OH				
[RI] [SC] [SD] [TN] [TX] [UT] [VT] [VA] [WA] [WV] [WI] [WY] [PR]			
Full Name (Last name first, if individual)				
Business or Residence Address (Number and Street, City, State, Zip Code)				
Name of Associated Broker or Dealer				
States in Which Person Listed Has Solicited or Intends to Solicit Purchasers	ele Provincia de la comenza e partir e de come en en esta papara que en encentra en el forme e en en entre disc			
(Check "All States" or check individual States)	[] All States			
[AL] [AK] [AZ] [AR] [CA] [CO] [CT] [DE] [DC] [FL] [GA	.] [HI] [ID]			
[IL] [IN] [IA] [KS] [KY] [LA] [ME] [MD] [MA] [MI] [MI	I] [MS] [MO]			
[MT] [NE] [NV] [NH] [NJ] [NM] [NY] [NC] [ND] [OH] [OK [RI] [SC] [SD] [TN] [TX] [UT] [VT] [VA] [WA] [WV] [WI				

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

1. Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if answer is "none" or "zero." If the transaction is an exchange offering, check this box " and indicate in the columns below the amounts of the securities offered for exchange and already exchanged.		
and aneady exchanged.	Aggregate	Amount Already
Type of Security	Offering Price	Sold
Debt	\$ 0	\$
Equity	\$17,293,500	\$ 17,293,500
[XX] Common [] Preferred		
	\$	\$
	\$ 0	\$ 0
Other (Specify	\$	\$
Total	\$ 17,293,500	\$ 17,293,500
Answer also in Appendix, Column 3, if filing under ULOE.		
2. Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."		
•		Aggregate -
	Number Investors	Dollar Amount
Accredited Investors	1	of Purchases \$ 17,293,500
Non-accredited Investors	0	\$ 0
		-\$
Total (for filings under Rule 504 only)		-
Answer also in Appendix, Column 4, if filing under ULOE.		
3. If this filing is for an offering under <u>Rule 504</u> or <u>505</u> , enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C-Question 1.		
N/A		Dellar Amount
Type of offering	Type of Security	Dollar Amount Sold
Rule 505		\$
Regulation A		\$
Rule 504		\$
Total		\$

4. a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.		
		0
Transfer Agent's Fees]\$0
Printing and Engraving Costs	•]\$0 1\$0
Legal Fees	•	J
Accounting Fees	-	J
Engineering Fees	•	J ~
Other Expenses (identify)]\$
Total		1\$ 0

b. Enter the difference between the aggregate offering price given in response to Part C - Question 1 and total expenses furnished in response to Part C - Question 4.a. This difference is the "adjusted gross proceeds to the issuer."

<u>\$1,735,000</u>

5. Indicate below the amount of the adjusted gross proceeds to the issuer used or proposed to be used for each of the purposes shown. If the amount for any purpose is not known, furnish an estimate and check the box to the left of the estimate. The total of the payments listed must equal the adjusted gross proceeds to the issuer set forth in response to Part C - Question 4.b above.

Salaries and fees
Purchase of real estate
Purchase, rental or leasing and installation of machinery and equipment
Construction or leasing of plant buildings and facilities
Acquisition of other businesses (including the value of securities involved in this offering that may be used in exchange for the assets or securities of another issuer pursuant to a merger)
Repayment of indebtedness
Working capital
Other (specify): purchase of oil and gas leases
and related equipment
Column Totals
Total Payments Listed (column totals added)

Payments to Officers, Payments				
Directors, &		То		
	liates		hers	
[] \$	0.	[]	0	
[] \$	0	[] \$_	0	
[] \$_ [] \$_ []	0	[] \$_ [] \$_	0	
[]	0	[] \$_	0	
[] \$	0	[] \$_	0	
[] \$	0	[]	0	
[] \$	0 _	[]	0	
[]	0 _	⅓] \$1	77293 , 500	
[] \$_	0	[]	0	
[] \$	0	[k] \$1	7,293 <u>,5</u> 00	
[x] \$ <u>17:/293.,50</u> 0				

D. FEDERAL SIGNATURE

The issuer has duly caused this notice to be signed by the undersigned duly authorized person. If this notice is filed under Rule 505, the following signature constitutes an undertaking by the issuer to furnish to the U.S. Securities and Exchange Commission, upon written request of its staff, the information furnished by the issuer to any non-accredited investor pursuant to paragraph (b) (2) of Rule 502.

Issuer (Print or Type)	Signature Date
DELTA PETROLEUM CORPORATION	ga a July 5/3/04
Name of Signer (Print or Type)	Title of Signer (Print or Type)
Roger A. Parker	President and CEO

ATTENTION

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)